

**CITY OF ROCHESTER
MWBE FORM F
REPORT OF MWBE UTILIZATION – PUBLIC WORKS**

TO: CONTRACT COMPLIANCE ADMINISTRATOR
Department of Finance
City Hall Room 106A
30 Church Street
Rochester, NY 14614

*** Stage of Project Completion:**

* ____ 100% ** ____ Final

** If any retainage is due a final Form F must be submitted upon completion of payments.

**A copy of this form is due with each payment application.

Bid # C0 **Contract #** _____ **Project Title:** _____

Contractor Name	MBE/ WBE	Scope of Work	Start/End Dates	Amount of Contract and Amendments	Amount Paid to Date	Percentage of Contract Paid to Date	Retainage due as of 100% completion mark

Prime Contractor Company Name: _____

Printed Name: _____

Signature: _____

Title: _____

Date: _____